10/751,301

m:David H Garroll	PLLC To: Commission	oner for Patents	(15712736500

13:58 08/05/10GMT-05 Pg 05-08

AUG 0 5 2010

PTO/SB/81A (12-08) Approved for use through 11/30/2011. OMB 0651-0035 U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

der the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT - POWER OF ATTORNEY OR	Patent Number	7,545,839	
	Issue Date	June 9, 2009	
	First Named Inventor	David M. Giorgi	
WITH A NEW POWER OF ATTORNEY AND	I I I I I I I I I I I I I I I I I I I	APPARATUS AND METHOD FOR DRIVING A PULSED LASER DIODE	
CHANGE OF CORRESPONDENCE ADDRESS	Attorney Docket Number	1970-011	

l here	eby revoke all	previous powers of attorney given in the	e above-identif	ied patent.				
	A Power of Attorney is submitted herewith.							
OR								
X		hereby appoint Practitioner(s) associated with the following Customer Number as my/our						
		or agent(s) with respect to the patent identified above, and to transact all business in States Patent and Trademark Office connected therewith:						
OR		States Faterit and Trademark Office Confected Indiawant.						
	I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) with respect to the patent identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:							
	ı	Practitioner(s) Name			n Number			
				····				
				-,				
<u>,</u>								
E3	Please recognize or change the correspondence address for the above-identified patent to:							
X		sociated with the above-mentioned Customer Nu	imber.					
0								
		oclated with Customer Number:						
0	· · · · · · · · · · · · · · · · · · ·							
	Firm or Individual Name							
Addre	Address							
City			State		Zip			
Count	<u> </u>							
Telepi			Email					
l am tr	I am the:							
Inventor, having ownership of the patent. OR								
X	Ratent owner							
Statement under 51 G. 11 G. 12								
Signature Date Date								
Name		David M. Giorgi, Ph.D.	· · · · · · · · · · · · · · · · · · ·	Date Telephone	(858) 452-8789			
	and Company	President/CEO, OptiSwitch Technology Corpor	ation	Laightinge	1000/ 102-0101			
NOTE: Signatures of all the inventors or patent owners of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
signati								
*Total offorms are submitted.								

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete. including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.